Indiana State Police Methamphetamine Laboratory Occurrence Report This form complies with the statutory requirement set forth in IC 5-2-15-3.

Date;	<u>8/25/20</u> 1 <u>0</u>	Address:	Rookstool Rd, East of
Case #:	<u>24-31823</u>		300 E.
County:	Kosciusko		Milford, Indiana
Type of Laboratory Seizure (check one) ☐ Operational Lab ☐ Chemical/Glassware/Equipment (only) ☐ Dumpsite (only)		Seizure Location (c Residence Outbuilding Vehicle	check all that apply) Hotel/Motel Open – No Structure Other:
Items Found: Location (bedroom, kitchen, open air, etc)			
(check all that apply) Lithium/Ammonia Reaction(s): open air			
Red Phosphorous/Iodine Reaction(s):			
Flammable Solvents: open air			
Water Reactive Metal (Lithium); open air			
Anhydrous Ammonia: open air			
☐ Hydrochloric Acid Gas Generator(s): open air			
Corrosive Acid: open air			
Corrosive Basc: open air			
Other (item and location):			
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Child under age 18 discovered (check one) Yes (number present) No *If yes, fax report to Child Protective Services		Investigative Information Ephedrine/Pseudoephedrine Tracking Log Retail/Merchant Tip Other: <u>LE</u>	
This report is to be faxed to the following agencies that serve the location:			
Fire Department: <u>MILFORD VFD</u> Health Department: <u>Koscius</u> k <u>o County</u> Child Protection Service: <u>n/a</u>		Fax: 574-658-4141 Fax: (574) 269-2023 Fax:	
For further information regarding this methamphetamine laboratory, contact investigating Officer: <u>Tpr. Jeff Wampler</u> Phone <u>574-546-4900</u>			

This form is to be included with the case file, and a copy sent to the Claudestine Laboratory Team Leader for retention.

This form is to be faxed to the l'irc Department, Health Department and/or Child Protective Services Department listed within 24 hours of scene processing.